



IN UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors:

Fernandez, et al.

Attorney Docket No.: FERN-P001D

Application No: 09/823,506

Art Unit:

2613

Filed:

3/28/2001

Examiner:

Vo, Tung T

Title:

Integrated Network for Monitoring Remote Objects

RESPONSE

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MAR 3 0 2004

Technology Center 2600

Commissioner of Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

This paper responds to final office action dated 1/26/2004.

Claims listing (page 2) and remarks (page 8) are provided herein.

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Prepranage set	"EXF

Certificate of Mailing By "U.S. Exp	ress Mail" Under 37 C.F.R. 1.10(c)
"EXPRESS MAIL" Mailing Label Number: EV 389013955 US	Date of Deposit: 03/26/2004
I hereby certify that this paper and/or fee is being deposited with th	e United States Postal Service "EXPRESS MAIL POST OFFICE
TO ADDRESSEE" service under 37 C.F.R. 1.10 on the date indica	ted above and is addressed to the Assistant Commissioner For
Patents, Washington, DC 20231.	$\sim 10^{-3}$
Name: <u>Laurie Rose de Leon</u>	- NAH Q
03/26/04	Thursday to
Signature Date	Signature

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: FERNANDEZ, et al

Attorney Docket No. FERN-P001D

Serial No.: 09/823,506

Examiner: VO, Tung T.

Filed: 3/28/2001

Dear Sir:

Art Unit: 2613

For: INTEGRATED NETWORK FOR MONITORING REMOTE OBJECTS

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

of time.

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AMENDMENT TRANSMITTAL LETTER

The same of the sa		
1. TRANSMITTED DOCUMENTS: the followi	ng documents relating to th	ie above-identified patent
application are being transmitted herewith.	sional, 11 magas	
X a. An Amendment for this application-divi		
b. Substituted informal Drawings:		26(a) incomparated harain
 c. A Petition For Extension of Time For R. d. An Information Disclosure Statement ur e. A stamped, self-addressed, return postca f. A Check No for \$	-	· ·
d. An Information Disclosure Statement ur e. A stamped, self-addressed, return postca		<u>A_</u> 1.97(0)
f. A Check No for \$		this correspondence
I. A CHECK NO IOI \$	_ to cover required rees or	inis correspondence.
2. APPLICANT FILING STATUS:		
a. Applicant is a Large Entity.		
X b. Applicant is a Small Entity.		
3. EXTENSION OF TIME:		
a. Applicant petitions for an extension of tim	e under 37 C.F. R. 1.136 fo	or the total number of
months checked below (fees pursuant to	37 C.F.R. 1.17(a)-(d).	
Extension of Time	Large Entity Fee	Small Entity Fee
i. One (1) month.	\$ 110.00	\$ 55.00
ii. Two (2) month.	\$ 390.00	\$ 195.00
iii. Three (3) month.	\$ 890.00 \$ 1,390.00	\$ 445.00
iv. Four (4) month.	\$ 1,390.00	\$ 695.00
v. Five (5) month.	\$ 1,890.00	\$ 945.00
Extension Time Fee Total: <u>\$.00</u>		

X b. Applicant believes that no extension of time is required. However, this conditional petition is

being made in case Applicant has inadvertently overlooked the need for a petition for extension

4. FEE CALCULATION:

The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid	Present Extra Claims	Fee Rate	Total
a. Total Claims	18	- 20=	0	x \$ 18.00 Large Entity x \$ 9.00 Small Entity	\$.00
b. Independent Claims	3	- 3=	0	x \$ 78.00 Large Entity x \$ 39.00 Small Entity	\$.00
c. Multiple Deper					
d. Extension of Time Fee Total, if any, from above EXTENSION OF TIME section 3a.					\$.00
e. Additional Fees Required With This Correspondence i) 1.17 (p) Fee for Information Disclosure under 1.97(c)					\$.00
e. Total Fees					\$.00

5. PAYMENT OF FEES

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1110	Lull	100	uuc	111	COMMICCUON	AA TETT	uns	Communication	IJ	provided a	3 1011077	э.

	The Commissioner is hereby authorized to charge the fees associated with this communication or credit any overpayment to Deposit Account No: 500482 . A <u>duplicate copy</u> of this authorization enclosed.
	A Check # for \$ for the above specified Total Fee is enclosed. However, should Applicant inadvertently miscalculated the required fee, the Commissioner is hereby authorized to charge the necessary additional amount associated with this communication or credit any overpayment to Deposit Account No: 500482 .
X	Applicant does not believe that any payment of fee is needed in association with this communication. However, should Applicant inadvertently miscalculated the required fee, the Commissioner is hereby authorized to charge any necessary amount associated with this communication or credit any overpayment to Deposit Account No: 500482 .
address:	Please direct all correspondence concerning the above-identified application to the following

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Fax: (650) 325-1203

Respectfully submitted,

DENNIS S. FERNANDEZ, ESQ.

Registration No. 34,160

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